Form **8871** (July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Department of the Treasury

1 Name of organization Roy 2000		06-158979			
2 Mailing address (P.O. Box or nu	imber, street, and room or sui				
1189 Springdale Street	1189 Springdale Street				
City or town, state, and ZIP coo	City or town, state, and ZIP code Milford, CT 06460				
3 E-mail address of organization Richard.Roy@po.state.ct.u					
4a Name of custodian of records	4b (Custodian's address			
		118 Springdale Street			
Alan Jepson	1	Milford, CT 06460			
5a Name of contact person	5b (Contact person's address			
		43 Howe Street			
Richard F. Roy		Milford, CT 06460			
8 Business address of organization	on (if different from mailing add	dress shown above). Number, street, and room or suite number			
City or town, state, and ZIP coo	de				
Part II Purpose	<u> </u>				
7 Describe the purpose of the ord	ganization				
Political Re-Flection Camp	paign Committee (State of	Connecticut - House of Representatives)			
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Part III List of All Relate	d Entities (see instruction	ons)			
	d Entities (see instruction 8b Relationship	ons) 8c Address			
Part III List of All Relate 8a Name of related entity	d Entities (see instruction 8b Relationship	ons) 8c Address			
	d Entities (see instruction 8b Relationship	ons) 8c Address			
	d Entities (see instruction 8b Relationship	ons) 8c Address			
	d Entities (see instruction 8b Relationship	ons) 8c Address			
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	d Entities (see instruction 8b Relationship	DOIS) 8c Address			
	d Entities (see instruction 8b Relationship	ons) 8c Address			
	d Entities (see instruction 8b Relationship	Bc Address			
8a Name of related entity	d Entities (see instruction 8b Relationship	ons) 8c Address			
8a Name of related entity	d Entities (see instruction 8b Relationship	Bc Address			
8a Name of related entity	d Entities (see instruction 8b Relationship	ons) 8c Address			
8a Name of related entity	d Entities (see instruction 8b Relationship	DOIS) Bc Address			
8a Name of related entity	8b Relationship	Ons) 8c Address Cet. No. 30406V Form 8871			

art IV Name	List of All Officers, Di	9b Title	mpensated Employees (see instructions) 9c Address
Harrie			
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	Under penalties of perjury, I dec	clare that the organization named i	ri Part I is to be treated as an organization described in section 527 of the Introprending schedules and statements, and for the best of my knowledge and b
	it is true, correct, and complete.	элапилео инз поисе, including асс	simplifying solideride and statements, and/of the eyes of my toleradge and o
			- L. I
	A Service of the	47 0.	N 1300
ign ere	Signature of authorized of	fficial	Date